

State of Minnesota**District Court**

County

Judicial District: _____

Court File Number: _____

Case Type: _____

☐ In Re the Marriage of:

Plaintiff / Petitioner

vs / and

Defendant / Respondent

Intervenor

Request For Continuance**Plaintiff/Petitioner:****Defendant/Respondent:**

(Name)

(Name)

(Street Address)

(Street Address)

(City/State/Zip)

(City/State/Zip)

County Attorney's Office:

(County Attorney)

(Street Address)

(City/State/Zip)

I, _____, request a continuance of the hearing scheduled
 for _____ at _____ o'clock ____m. because: (check either Number 1 or Number 2)
 (Date) (Name of Party)

1. All parties have agreed to a continuance.
2. I understand that if all parties have not agreed to a continuance, pursuant to Expedited Child Support Rule 364.05, I must explain why a continuance is needed. I request a continuance because:
 - Death or incapacitating illness of a party or attorney.
 - Lack of proper notice of the hearing.
 - Other (please explain)

Notice to Other Parties: You have a right to object to this Request for Continuance. If you object, you must serve upon all parties and file with the court a written letter stating why you object.

Dated: _____

Signature

Print Name: _____

Address: _____

City/State/Zip: _____

Telephone: (____) _____

Attorney for: _____